ANNUAL PAYOR REPORT

NEW YORK STATE DEPARTMENT OF HEALTH

1997 PUBLIC GOODS POOL

REPORT OF COVERED LIVES ASSESSMENTS

	FOR THE JANUARY 1 THROUGH DECEMBER 31,	REPORT YEAR
PAYOR NAME		FEDERAL TAX ID#
TPA NAME (if applicable)		TPA FEDERAL TAX ID#

V. Enter the number of 1997 covered lives (to the nearest whole number) under or (over) reported for prior periods (Prior Period Adjustments). If the payor erroneously submitted monthly reports during the current reporting year, enter any remaining adjustments to 1997 covered lives previously reported.

(Please note that, as mentioned in further detail in the instructions, the only amounts to be reported on the 1997 covered lives portion of the reports are prior period adjustments. As a result, Lines A through L

have been eliminated. Thus the 1997 covered lives portion begins with Lines M and N.)

	TOTAL COVERED	REGION							
	LIVES	NEW YORK CITY	LONG ISLAND	NORTHERN METRO	NORTH- EASTERN	UTICA/ WATERTOWN	CENTRAL	ROCHESTER	WESTERN
(M)	# INDIVIDUALS								
(N)	#FAMILY								

VI. Schedule of regional covered lives annual assessment rates.

	ANNUAL	REGION							
	ASSESSMENT RATE	NEW YORK CITY	LONG ISLAND	NORTHERN METRO	NORTH- EASTERN	UTICA/ WATERTOWN	CENTRAL	ROCHESTER	WESTERN
(O)	INDIVIDUAL UNIT	116.75	33.81	21.18	23.03	4.69	27.01	51.87	18.37
(P)	FAMILY UNITS	385.29	111.58	69.91	75.99	15.48	89.14	171.18	60.63

1997

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FOR THE JANUARY 1 THROUGH DECEMBER 31,

REPORT OF COVERED LIVES ASSESSMENTS - con't

REPORT YEAR

PAYOR NAME						FEDERAL TAX ID#						
TPA N	TPA NAME (if applicable)						TPA FEDERAL TAX ID#					
VII. E	Enter the 1997 regional covered lives	assessment amounts. L	ines Q through S – Re	ound to the nearest ten	th. Line T – Round to	the nearest whole doll	ar.					
	ANNUAL	REGION										
	ASSESSMENT	NEW YORK CITY	LONG ISLAND	NORTHERN METRO	NORTH- EASTERN	UTICA/ WATERTOWN	CENTRAL	ROCHESTER	WESTERN			
(Q)	INDIVIDUAL UNIT (M x 0)											
(R)	FAMILY UNITS (N x P)											
(S)	TOTALS (Q + R)											
(T)	TOTAL 1997 COVERED LIVES PAYMENT LIABILITY (S / 12)											

VIII. Enter the total 1997 covered lives assessment balance due for the year (Total Line T) - Carry forward to the Payment and Reconciliation Summary.

1997